EXPRESS MAIL NO. EV741779253US

•	Sees pursuant to the C	Complete if Known								
	Sees pursuant to the C	Application Number		09/780,669						
J	FEE TRANSMITTAL				Filing Date		February 9, 2001			
	AN 08 7006 E			Jiangchun 2						
١	MAN 6/	Examiner Name		Larry Ronald Helms, Ph.D.						
%	Applicant claims s			1642	 					
`	7,1,2		Attorney Docket No. 210121.427C24							
	METHOD OF PAYMENT (check all that apply) ☐ Check ☐ Credit Card ☐ Money Order ☐ Other (please identify):									
	Deposit Account Number: 19-1090 Deposit Account Name: Seed IP Law Group PLLC For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
	Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
	Charge any additional fee(s) or underpayments Charge any underpayments or credit any overpayment								_	
	of fee(s) under 37 CFR 1.16 and 1.17									
	Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
	FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)									
	1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
		FILING FEES SEARC			H FEES		NATION EES			
	Small Entity		Small Entity		Ľ	Small Entity				
	Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	<u>Fee (\$)</u>	Fee (\$)	Fe	es Paid (\$)	
	Utility	300	150	500	250	200	100			
	Design	200	100	100	50	130	65			
	Provisional	200	100	0	0	0	0			
	2. EXCESS CLAIM	FEES							Small Entity	
	Fee Description]	Fee (\$)	<u>Fee (\$)</u>	
	Each claim over 20 (in	•	•					50	25	
	Each independent clai	·	uding Reissues)				200	100	
	Multiple dependent claims 360 180								180	
		Total Claims Extra Claims Fee (\$)				(\$)	Multiple Dependent Claims			
	<u>3</u> -20 or HP = <u>0</u> X = <u>Fee (\$)</u> <u>Fee Paid (\$</u>								ee Paid (\$)	
	HP = highest number of total claims paid for, if greater than 20.									
	Indep. Claims	Extra Cla		ee (\$)	Fee Paid	<u>(\$)</u>				
	<u>2</u> -3 or HP = <u>0</u> X =									
	HP = highest number of independent claims paid for, if greater than 3.									
	3. APPLICATION SIZE FEE									
	If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)) the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
	Total Sheets									
	100 = /50 = (round up to a whole number) x									
	4. OTHER FEE(S)								Fees Paid (\$)	
	Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Request for Continued Examination (RCE) fee 790									
	Five month extension of time fee 2,160									
	SUBMITTED BY									
	Signature	Signature 22 44,64 Regis for (Attorn					Telephone	206-62	22-4900	
Name (Print/Type) Jeffrey Hundley, Ph.D., Patent Agent							Date	May 8, 2006		